

## EW453

### Efficacy and safety of long-term cabergoline treatment of antipsychotic-induced hyperprolactinemia (naturalistic study)

O. Yunilaynen<sup>1,\*</sup>, E. Starostina<sup>2</sup>, L. Dzeranova<sup>1</sup>, P. Baranov<sup>3</sup>, I. Dedov<sup>4</sup>

<sup>1</sup> National research center for endocrinology, neuroendocrinology, Moscow, Russia

<sup>2</sup> Moscow regional clinical & research institute MONIKI, endocrinology, Moscow, Russia

<sup>3</sup> Russian medical academy of post-graduate training, psychiatry, Moscow, Russia

<sup>4</sup> National research center for endocrinology, diabetes center, Moscow, Russia

\* Corresponding author.

**Introduction** Antipsychotic-induced hyperprolactinemia (AIH) is associated with disturbing clinical symptoms, such as sexual dysfunctions, menstrual disorders and galactorrhea. Long-term studies of dopamine agonists in AIH are scarce.

**Objectives** To assess efficacy and safety of cabergoline use in psychiatric patients with AIH, including impact on sexual function and quality of life (QoL).

**Methods** It was an open-labeled non-randomized naturalistic prospective comparison of cabergoline vs no treatment in 84 chronic psychiatric patients (F/M = 77/7) with AIH. Cabergoline treatment was started in 44 patients, the control group included 40 patients who rejected the treatment with cabergoline. For assessment of QoL, sexual dysfunction and other hyperprolactinemia symptoms, UKU side effects rating scale (UKU) and SF-36 were used.

**Results** The main and control groups were comparable on all main clinical and psychiatric characteristics. The effective cabergoline dose was 0,25–3 (median–0,5) mg weekly; total cabergoline exposure–534 patient-weeks. Normal prolactin levels were achieved after 4–44 (median–14) weeks in 95% of patients. At 3 months after cabergoline discontinuation, prolactin remained normal in 71%, and AIH recurred in 29% of patients. Prolactin normalization was associated with significant reduction of menstrual disorders, galactorrhea, improvement of UKU scores on sexual desire, orgasmic dysfunction, total UKU score and SF-36 scores on subscales of social functioning ( $P=0,006$ ), role-emotional ( $P=0,042$ ), and mental health ( $P=0,049$ ). The rate of psychosis exacerbation in control group was higher than in the treatment group (37,5% vs 0%;  $P<0,001$ ).

**Conclusions** Cabergoline is effective and safe in majority of AIH patients. Long-term cabergoline treatment is not associated with psychosis exacerbation. Beyond reversal of typical AIH symptoms, treatment with cabergolin improves sexual function and QoL.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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### Psychosurgery and stimulation methods (ECT, TMS, VNS, DBS)

## EW454

### Electroconvulsive therapy in elderly - a preliminary study

C. Agostinho\*, M. Duarte, R. Alves, I. Cunha, A.M. Batista  
Centro hospitalar psiquiátrico de Lisboa, Lisboa, Portugal

\* Corresponding author.

**Introduction** Studies with electroconvulsive therapy (ECT) in elderly focus mainly on the assessment of possible side effects on the cognitive functioning; there are few studies that evaluate the effectiveness.

**Objective** Evaluate the effectiveness of this treatment in the population over 65 years.

**Aims** Perform a preliminary study to evaluate the response to ECT of  $\geq 65$  years patients with depression.

**Methods** We carry out a descriptive study based on patients treated in the last 10 years in the ECT Unit of Centro Hospitalar Psiquiátrico de Lisboa.

**Results** Our initial sample consisted of 457 patients. We select patients aged  $\geq 65$  years with depression, and with complete data, including electroconvulsive parameters, and initial and final Hamilton Rating Scale for Depression (HRSD) scores ( $n=59$ ). Of this, 81.36% ( $n=48$ ) had unipolar depression, and 18.64% ( $n=11$ ) had bipolar depression. In the first group, the mean variation between the initial and final scores in HRSD was 13.88 points, and 27.10% ( $n=13$ ) of the patients ended the treatment in the normal range of HRSD score. In the second group, the mean variation was 12.82, and 63.60% ( $n=7$ ) ended the treatment in the normal range of HRSD. Considering the initial and final HRSD scores, it appears that unipolar depression group presents higher values (severe depression) ( $P<0.05$ ). When we compare the mean variation between the initial and final HRSD scores, we didn't observe a statistically significant difference between the two groups. There was a clinical improvement in both.

**Conclusions** The acute treatment with ECT appears to improve depressive symptoms in bipolar and unipolar depression, when considering an elderly population.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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## EW455

### Knowledge and attitude toward repetitive transcranial magnetic stimulation (rTMS) among psychiatrists in Saudi Arabia

A. Alhadi<sup>1,2,\*</sup>, A. AlShiban<sup>3</sup>, M. Alomar<sup>3</sup>, O. Aljadoa<sup>3</sup>, A. AlSayegh<sup>3</sup>, M. Jameel<sup>3</sup>

<sup>1</sup> King Saud university, department of psychiatry, Riyadh, Kingdom of Saudi Arabia

<sup>2</sup> King Saud university, SABIC psychological health research & applications chair SPHRAC, Riyadh, Kingdom of Saudi Arabia

<sup>3</sup> King Saud university, college of medicine, Riyadh, Kingdom of Saudi Arabia

\* Corresponding author.

**Introduction** Repetitive transcranial magnetic stimulation (rTMS) is a new treatment, used for different psychotic disorders mainly depression.

**Objectives** Assessing knowledge and attitude toward rTMS among psychiatrists in Saudi Arabia, and determining factors affecting that.

**Aims** To ensure that psychiatrists have sufficient knowledge regarding rTMS. A good knowledge will most likely have a positive impact on their attitude.

**Methods** Cross-sectional study was conducted through an online survey. The study population is all psychiatrists in Saudi Arabia. A new valid and reliable questionnaire was developed.

**Results** Sample of 96 psychiatrists enrolled in the study, 81% were males. Participant's mean age was 37 years. Half of participants were consultants. The sample mainly consists of general psychiatrists (65%). The study showed that 80% of psychiatrists have an efficient knowledge about rTMS. Consultants have higher knowledge than residents do. Abroad training has no association with the level of knowledge or attitude. Seventy-nine percent of